



SB 77

CREATE A RESIDENT LICENSE; REPEAL THE TELEMEDICINE, SPECIALIZED AND TEMPORARY LICENSES; REVISE THE REQUIREMENTS OF THE PRACTICE OF MEDICINE; ALLOW BOARD TO ENTER COMPACT TO ALLOW INTERSTATE PRACTICE OF MEDICINE IN COMPACT STATES; UPDATE ENTITY NAMES.

BY REQUEST OF THE BOARD OF MEDICAL EXAMINERS

SPONSOR – SEN. DEBBY BARRETT SD 36

EXHIBIT 2
DATE 2/11/2015
SB 77

CONTACT

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SUMMARY OF CHANGES *CONTINUED...*

Section 13: The amendment to this statute removes the outdated language about Board signatures on license documents.

Section 14: The amendments to this statute remove unnecessary language and state clearly that the Board may deny a license for cause.

Section 15: The amendments to this statute on license suspensions makes it clear that the Board can designate a representative (such as its Professional Assistance Program) to arrange a physical or mental evaluation ordered by the Board.

Section 16: Currently, hospitals must report any change in the privilege status of physicians, even if the change was in response to violation of hospital policies not related to patient

care. The Board is responding to requests from hospitals that those violations be exempted from the statutory reporting requirement.

Section 17: This amendment removes the requirement that applicants for Physician Assistant hold certification from the National Commission on the Certification of Physician Assistants. The Board will continue to require that PA applicants successfully pass the NCCPA examination, which leads to certification.

Section 18: Repealer. Along with the various Physician-related statutes to be repealed, the Board also proposes repealing an outdated statute regarding the designation of Podiatrist licenses.

Section 19: Effective date. (July 1, 2015.)

OVERVIEW OF DIVISION'S POSITION

The Division supports the Board's efforts to eliminate outdated, duplicative or ineffective statutory language. Further, creating a Resident Physician licensing statute and eliminating the statutes regarding Specialized, Temporary and Telemedicine licenses will simplify the training of the Division's licensing staff. In addition, removing the confusing and sometimes contradictory statutory language on Telemedicine licenses will assist the Board and its staff. The Division also supports the Board's determination that telemedicine is best regulated through rules on Physician practice and not by a special license type.

DATA IN SUPPORT OF THE DIVISION'S POSITION

The Board has issued Temporary Physician licenses only rarely and in special circumstances and does not issue them as a step to full licensure. The primary demand for shorter-term licenses now is for medical residents in three Montana programs. Hence the need to change the Temporary statute to a Resident statute.

The Board has issued only three or four Specialized Physician licenses since the statute was instituted. The license type is no longer needed.

The Board has shared its work on these statutes with the Montana Medical Association and Montana Hospital Association. Neither organization has expressed opposition.



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SUMMARY OF CHANGES

The proposed legislation addresses three concerns:

- 1) General updating of definitions and terms so that they accurately reflect changes in the practice of medicine that have occurred in the past decade, cleanup of redundant language and streamlining of medical license process and requirements;
- 2) Creation of a resident license now that Montana has three residency programs with a need for residents to be licensed in order to have DEA licenses and to practice under supervision in a satellite location;
- 3) Repeal of the outdated telemedicine statutes to keep up with national trends in practice mobility and technological advances in communication. A full medical license will now be required for any practice within the state.

The proposed legislation should generate no new complaints.

Section 1: Updating of language regarding the Montana Medical-Legal Panel's definition of "Physician" (removing references to Telemedicine licensees.) The Board did not consider this change as it is not the Board's statute; the bill drafter added the section.

Section 2: The Board is adding definitions of terms and organizations previously not included. It also is updating names of organizations that have changed or were incorrectly stated. The Board also is adding the practice of telemedicine to the definition of "practice of medicine."

Section 3: The Board is removing outdated language from the statute on exemptions from licensure and removing language authorizing the Board to require resident physicians to be licensed for practice outside the residency. On the latter subject, after consultations with Montana residency programs, the Board will defer to national and local program standards regarding the conduct of medical residents.

Section 4: The amendments to this section on Board organization remove outdated language, as well as language found in other statutes.

Section 5: The amendments to this section on Board powers and duties add chapters and parts or law omitted in the current statute. The Board also is adding a section allowing it to enter into license recognition agreements with other states.

Section 6: This simple amendment removes "examinations" from the activities to be conducted at Board meetings. The Board no longer administers exams.

Section 7: This simple amendment changes the term "executive secretary" to "executive officer" to correctly identify the Board's staff executive.

Section 8: This statute reduces the types of Physician licenses from four to two. The remaining license types will be Physician and Resident. Licensees holding license types to be eliminated will be able to keep the existing license until the next renewal deadline.

Section 9: This simple amendment removes the word "reasonably" from the sentence stating that a Physician must practice in a manner consistent with training, skill and experience.

Section 10: This statute will become the sole statute listing qualifications for a Physician license. It clarifies requirements for post-graduate training and examination and allows the Board to add requirements in order to enter an interstate licensing agreement or for cause with an individual applicant.

Section 11: This statute will become the sole statute listing qualifications for a Resident license. It recognizes the needs of both Montana residency programs and those from other states.

Section 12: The amendments to this statute remove unnecessary language regarding application fees.



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